

County: Milwaukee
HEARTLAND OF MILWAUKEE

Facility ID: 7140

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3216 WEST HIGHLAND BOULEVARD

MILWAUKEE 53208 Phone:(414) 344-6515

Owned by: Milwaukee County
Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 95

Total Licensed Bed Capacity (12/31/02): 96

Number of Residents on 12/31/02: 92

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

84

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		41.3
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		51.1
Supp. Home Care-Household Services	No	Developmental Disabilities	5.4	Under 65	33.7	More Than 4 Years		7.6
Day Services	No	Mental Illness (Org./Psy)	14.1	65 - 74	21.7			-----
Respite Care	Yes	Mental Illness (Other)	25.0	75 - 84	33.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	16.3	85 - 94	8.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.3	95 & Over	2.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	4.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.1		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	5.4	65 & Over	66.3	-----		
Transportation	No	Cerebrovascular	1.1		-----	RNs		4.3
Referral Service	No	Diabetes	12.0	Sex	%	LPNs		16.4
Other Services	Yes	Respiratory	1.1	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	9.8	Male	59.8	Aides, & Orderlies		
Mentally Ill	No		-----	Female	40.2			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			3	5.5	119	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	3.3
Skilled Care	13	100.0	237			42	76.4	103	6	100.0	103	12	100.0	144	5	100.0	103	1	100.0	353	79	85.9
Intermediate	---	---	---			10	18.2	87	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	10	10.9
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	13	100.0				55	100.0		6	100.0		12	100.0		5	100.0		1	100.0		92	100.0

Admissions, Discharges, and Deaths During Reporting Period						Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

Percent Admissions from:						Activities of	%	% Needing Assistance of	% Totally	Total
						Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	12.2					Bathing	7.6	67.4	25.0	92
Private Home/With Home Health	2.2					Dressing	23.9	52.2	23.9	92
Other Nursing Homes	0.6					Transferring	42.4	42.4	15.2	92
Acute Care Hospitals	80.0					Toilet Use	35.9	34.8	29.3	92
Psych. Hosp.-MR/DD Facilities	4.4					Eating	73.9	13.0	13.0	92
Rehabilitation Hospitals	0.0					*****				
Other Locations	0.6					Continence		%	Special Treatments	%
Total Number of Admissions	180					Indwelling Or External Catheter		7.6	Receiving Respiratory Care	1.1
Percent Discharges To:						Occ/Freq. Incontinent of Bladder		46.7	Receiving Tracheostomy Care	0.0
Private Home/No Home Health	19.3					Occ/Freq. Incontinent of Bowel		39.1	Receiving Suctioning	0.0
Private Home/With Home Health	12.9					Mobility			Receiving Ostomy Care	3.3
Other Nursing Homes	4.1					Physically Restrained		5.4	Receiving Tube Feeding	4.3
Acute Care Hospitals	49.1								Receiving Mechanically Altered Diets	0.0
Psych. Hosp.-MR/DD Facilities	2.9					Skin Care			Other Resident Characteristics	
Rehabilitation Hospitals	0.0					With Pressure Sores		4.3	Have Advance Directives	59.8
Other Locations	1.8					With Rashes		0.0	Medications	
Deaths	9.9								Receiving Psychoactive Drugs	40.2
Total Number of Discharges (Including Deaths)	171									

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility	Ownership: Proprietary		Bed Size: 50-99		Licensure: Skilled		All Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.1	81.9	1.06	86.7	1.00	84.2	1.03	85.1	1.02
Current Residents from In-County	91.3	83.1	1.10	90.3	1.01	85.3	1.07	76.6	1.19
Admissions from In-County, Still Residing	17.2	18.8	0.92	20.3	0.85	21.0	0.82	20.3	0.85
Admissions/Average Daily Census	214.3	182.0	1.18	186.6	1.15	153.9	1.39	133.4	1.61
Discharges/Average Daily Census	203.6	180.8	1.13	185.6	1.10	156.0	1.31	135.3	1.50
Discharges To Private Residence/Average Daily Census	65.5	69.3	0.95	73.5	0.89	56.3	1.16	56.6	1.16
Residents Receiving Skilled Care	89.1	93.0	0.96	94.8	0.94	91.6	0.97	86.3	1.03
Residents Aged 65 and Older	66.3	87.1	0.76	89.2	0.74	91.5	0.72	87.7	0.76
Title 19 (Medicaid) Funded Residents	59.8	66.2	0.90	50.4	1.19	60.8	0.98	67.5	0.89
Private Pay Funded Residents	13.0	13.9	0.94	30.4	0.43	23.4	0.56	21.0	0.62
Developmentally Disabled Residents	5.4	1.0	5.65	0.8	7.24	0.8	6.77	7.1	0.77
Mentally Ill Residents	39.1	30.2	1.30	27.0	1.45	32.8	1.19	33.3	1.17
General Medical Service Residents	9.8	23.4	0.42	27.0	0.36	23.3	0.42	20.5	0.48
Impaired ADL (Mean)	42.4	51.7	0.82	48.9	0.87	51.0	0.83	49.3	0.86
Psychological Problems	40.2	52.9	0.76	55.5	0.73	53.9	0.75	54.0	0.74
Nursing Care Required (Mean)	1.6	7.2	0.23	6.8	0.24	7.2	0.23	7.2	0.23